



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

| | | | |
|---|-----|------------------------|-----------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 09/919,425 |
| | | Filing Date | July 31, 2001 |
| | | First Named Inventor | Shrikant Jannu |
| | | Group Art Unit | 2142 |
| | | Examiner Name | Blair, Douglas B. |
| Total Number of Pages in This Submission | 469 | Attorney Docket Number | IDF 1540 (4000-02000) |

| ENCLOSURES (check all that apply) | | |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input checked="" type="checkbox"/> Drawing(s) (3 sheets, Figs. 1-2 and Fig. 5) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none">• Acknowledgment Postcard• Cited References |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|---|-----------------------------------|------|-------------------|
| Firm Or Individual Name | Michael W. Piper, Reg. No. 39,800 | | |
| Signature | | | |
| Date | February 17, 2005 | | |
| CERTIFICATE OF MAILING | | | |
| I hereby certify that this correspondence is being deposited as first class mail addressed to: Mail Stop Amendment, Commissioner of Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Typed or Printed Name | Karen A. Harris | | |
| Signature | | Date | February 17, 2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and selection option 2